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## BIB DATA SHEET

CONFIRMATION NO. 4286

<b>SERIAL NUMBER</b> 10/797,354	<b>FILING or 371(c) DATE</b> 03/10/2004 <b>RULE</b>	<b>CLASS</b> 600	<b>GROUP ART UNIT</b> 3626	<b>ATTORNEY DOCKET NO.</b> BBMG-100US		
<b>APPLICANTS</b> Stefan Moll, Melsungen, GERMANY; Gerhard Bock, Friedewald, GERMANY; Dirk Moeller, Altmorschen, GERMANY; Sandor Dolgos, Szentendre, HUNGARY;						
<b>** CONTINUING DATA *****</b> <b>** FOREIGN APPLICATIONS *****</b> GERMANY 103 10 873.4 03/11/2003 <b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED **</b> 05/26/2004						
Foreign Priority claimed <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No 35 USC 119(a-d) conditions met <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Verified and Acknowledged <u>/MICHELLE LE/</u> Examiner's Signature		<input type="checkbox"/> Met after Allowance Initials	<b>STATE OR COUNTRY</b> GERMANY	<b>SHEETS DRAWINGS</b> 6	<b>TOTAL CLAIMS</b> 20	<b>INDEPENDENT CLAIMS</b> 3
<b>ADDRESS</b> RATNERPRESTIA P O BOX 980 VALLEY FORGE, PA 19482-0980 UNITED STATES						
<b>TITLE</b> Dialysis station						
<b>FILING FEE RECEIVED</b> 900	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:			<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		